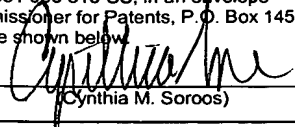


I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 831 966 815 US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: September 30, 2004 Signature: 

(Cynthia M. Soroos)

Docket No.: PAZ-222CN
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Mark L. Nelson *et al.*

Application No.: 10/786881

Art Unit: 1614

Filed: February 24, 2004

Examiner: Not Yet Assigned

For: 9-AMINOMETHYL SUBSTITUTED
MINOCYCLINE COMPOUNDS

PRELIMINARY AMENDMENT

MS Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Prior to examination on the merits, please amend the above-identified U.S. patent application as follows:

Amendments to the Claims begin on page 2 of this paper.

Remarks begin on page 9 of this paper.



AMENDMENT TRANSMITTAL LETTER				Docket No. PAZ-222CN	
Application No. 10/786881-Conf. #1902	Filing Date February 24, 2004	Examiner Not Yet Assigned	Art Unit 1614		
Applicant(s): Mark L. NELSON <i>et al.</i>					
Invention: 9-AMINOMETHYL SUBSTITUTED MINOCYCLINE COMPOUNDS					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	90	- 20 =	70	x 18.00	1,260.00
Independent Claims	3	- 3 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within third month; Surcharge-Late filing fee Basic Filing Fee					1,850.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					3,110.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>12-0080</u> in the amount of \$ <u>3,128.00</u> . A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>12-0080</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Cynthia M. Soroos Attorney Reg. No.: 53,623 LAHIVE & COCKFIELD, LLP 28 State Street Boston, Massachusetts 02109 (617) 227-7400				Dated: <u>September 30, 2004</u>	
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 831 966 815 US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.					
Dated: September 30, 2004		Signature: (Cynthia M. Soroos)			